

Alberta Aids to Daily Living PROGRAM



Urinary Incontinence

PROGRAM MANDATE:

The Alberta Aids to Daily Living (AADL) program helps Albertans with a long-term disability, chronic illness or terminal illness maintain their independence in their home through the provision of medical equipment and supplies to meet their basic medically assessed needs.

Common Myths About Incontinence

Myth: Losing bladder function is just part of getting older.

Fact: *Incontinence is not a part of aging. If you need help getting started in promoting a healthy bladder, ask your health care professional.*

Myth: Decreasing fluid intake will decrease the degree of incontinence.

Fact: *Decreased fluid intake irritates the bladder. This promotes an increased need to urinate and may promote urinary tract infections.*

Myth: Practicing healthy tips for bladder control does not work.

Fact: *The healthy tips are effective. If you have trouble, please make an appointment with a Nurse Continence Advisor or a family physician for further assessment.*

Healthy Bladder Tips

- Limit alcohol intake
- Limit tobacco intake
- Limit caffeine intake
- Maintain normal weight
- Maintain good fluid intake (8 to 10 glasses daily)
- Limit foods high in acid content (i.e. tomatoes)
- Exercise on a regular basis
- Practice pelvic floor exercises regularly (Kegel exercises)
- Practice bladder retraining

Strategies for Managing/Decreasing Incontinence

- **Take regular bathroom breaks. Don't overstretch your bladder.**

To promote a healthy bladder, it is best to have bathroom breaks every 3-4 hours during waking hours. Holding the urge to void stretches the bladder and can promote incontinence.

- **Drink 8-10 glasses of “good” fluids daily (water, milk, juice, herbal tea).**

Many people think if they limit their fluid intake, they will not have to visit the bathroom as often or experience as much wetting; however, the opposite is true. Not drinking enough fluids can increase the need to void, increasing incontinence. Dehydration can also promote the development of urinary tract infections.

- **Drink fluids throughout the day and limit fluids late at night.**

Limiting your fluid intake at night will decrease the workload on your bladder and prevents voiding during the night. For example, after 8:00 p.m. try to limit your fluid intake.

- **Limit caffeine intake.**

Caffeine is a bladder irritant. When you drink coffee, caffeinated tea and colas, you jumpstart the bladder, causing frequent trips to the bathroom. Beverages containing caffeine dehydrate rather than hydrate. It is best to decrease or eliminate caffeinated beverages. Remember, each cup of caffeinated beverage needs to be replaced with two glasses of “good” fluids.

- **Avoid constipation.**

When you are constipated, the bowels put more pressure on the bladder. This pressure can promote incontinence. It is best to maintain a regular bowel routine. If you need help getting started, consult a health care professional such as a registered nurse, pharmacist or a physician.

- **Exercise regularly.**
Regular exercise promotes strong pelvic muscles. Strong pelvic muscles promote bladder continence. Walking, for example, encourages the movement of feces through the bowel and promotes regularity.
- **Practice pelvic floor exercises (Kegels).**
Strong pelvic floor muscles promote a healthy bladder. Practicing Kegels on a regular basis keeps the bladder muscles toned. This helps promote and maintain bladder continence. If you need help getting started, consult a health care professional such as a registered nurse, occupational therapist or physiotherapist.
- **Use appropriate bathroom equipment.**
Specialized commodes can support an adult who is unable to sit safely without assistance. See your health care professional for a bathroom assessment and information on equipment options.

Types of Incontinence

- **Stress Incontinence:** This is the involuntary loss of urine when the abdomen is under stress. For example, when coughing or laughing, there is an involuntary loss of urine.
- **Urge Incontinence:** This is typically experienced as a sudden strong need to urinate. For example, feeling a strong urge to get to the bathroom and experiencing a loss of urine before reaching the toilet.
- **Overflow Incontinence:** This occurs when the bladder does not empty completely and causes urine to leak out.
- **Reflex Incontinence:** This is the loss of urine without any awareness.
- **Mixed Incontinence:** This is the combination of urge and stress incontinence.

Who is eligible for AADL benefits?

- AADL provides assistance for incontinence supplies and bathroom equipment to Albertans who have chronic uncontrolled incontinence with a moderate or heavy loss, or where the total amounts of urine and/or stool is 250 mL daily at each involuntary void or defecation.
- To qualify for incontinence supplies you must:
 - be an Alberta resident;
 - have a valid Alberta Personal Health Number (PHN); and
 - have been assessed by an AADL authorizer.
- The program does not provide funding for clients with:
 - incontinence that has not been investigated;
 - incontinence for which strategies have not been implemented, evaluated and re-assessed;
 - incontinence that has been present for less than 6 months;
 - children under the age of 36 months of age;
 - nighttime enuresis (bedwetting);
 - simple stress or urge incontinence;
 - post-surgical incontinence;
 - acute drug-induced side effects;
 - psychological incontinence (voluntary control of incontinence); or
 - menses.

Obtaining incontinence supplies from AADL

1. How do I get my incontinence assessed?

- Contact your regional health authority to make an appointment for an assessment by an approved AADL authorizer. AADL authorizers are health care professionals (typically a registered nurse, physical therapist or occupational therapist) who are trained and approved to authorize AADL benefits, such as incontinence supplies.
- The AADL authorizer will complete a urinary assessment form.
- You will be required to complete a three-day bladder diary. This gives the authorizer a “snapshot” of your fluid intake and bathroom routine.
- The authorizer will also ask how you manage your incontinence and what products you use. The authorizer will have you try different products, suggest changes in your fluid intake and suggest bladder-training exercises. The authorizer may also suggest that you obtain a referral from your family physician to a nurse continence specialist or urologist for further assessment.
- If you are eligible for incontinence supplies through AADL, the authorizer will determine the appropriate products and quantity based on your clinically assessed needs.
- The authorizer will provide you with an authorization form along with other information you may require.
- The authorizer will provide you with a list of AADL vendors in your area where you may get your incontinence supplies.

2. Where do I get my incontinence supplies?

- Go to any of the AADL vendors on the list provided by the AADL authorizer. AADL will not reimburse the cost of products or supplies purchased from stores that are not on the AADL vendor list.

- Take the authorization form provided by the authorizer and present it to the vendor. AADL vendors do not assess or authorize clients for incontinence supplies; however, AADL vendors are informed of different products and absorbency standards and can help match your clinical need with the appropriate product. Vendors will often provide samples as requested by your authorizer during the assessment process.

3. What incontinence supplies are provided by AADL?

- AADL provides several types of incontinence supplies, including disposable products, condom catheters and indwelling catheters.
- AADL has minimum absorbency standards and maximum quantity guidelines for all incontinence products. These standards and guidelines are based on best practice and current research.

4. Do I pay for my incontinence supplies?

- AADL is a cost-share program. Clients pay 25 per cent of the cost of the incontinence supplies. You pay your share to the AADL vendor. The AADL vendor will bill AADL directly for the remaining 75 per cent. There are exemptions from cost-share for low-income clients. Consult your authorizer for information about cost-share exemption.
- AADL provides assistance for incontinence supplies in two-month periods. The program pays a pre-determined price, called a benchmark price, that each vendor must match. You and AADL pay shelf price, sale price or benchmark whichever cost is lower. If you want a more expensive product, you have to pay the cost difference between the benchmark price and the price of the product you choose.
- AADL does not reimburse clients or pay for incontinence supplies purchased before an AADL authorizer has completed an authorization.

**AADL is a program of Alberta Seniors and
Community Supports**

For more information, contact your regional health authority or:

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Deaf/hearing impaired callers within Alberta using a TTY can reach the provincial government by dialing 427-9999 in Edmonton or 1-800-232-7215 throughout Alberta.

Visit our website at:
www.seniors.gov.ab.ca/AADL

